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PTO/SB/30 (10-01)

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RCE



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**REQUEST
FOR
CONTINUED EXAMINATION (RCE)
TRANSMITTAL**

Address to:
Mail Stop RCE
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P.O. Box 1450
Alexandria, VA 22313-1450

<i>Application Number</i>	10/797,647
<i>Filing Date</i>	March 10, 2004
<i>First Named Inventor</i>	Morrison et al.
<i>Art Unit</i>	2822
<i>Examiner Name</i>	M. Lewis
<i>Attorney Docket Number</i>	2269-6103US (03-0954.00/US)

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. Submission required under 37 C.F.R. 1.114

- a. Previously submitted
 - i. Consider the amendment(s)/reply under 37 C.F.R. 1.116 previously filed on _____
(Any unentered amendment(s) referred to above will be entered).
 - ii. Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
 - iii. Other _____
- b. Enclosed
 - i. Amendment/Reply
 - ii. Affidavit(s)/Declaration(s)
 - iii. Information Disclosure Statement (IDS)
 - iv. Other _____

2. Miscellaneous

- a. Suspension of action on the above-identified application is requested under 37 C.F.R. 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. 1.17(i) required)
- b. Other: Petition for Extension of Time
- 3. **Fees** The RCE fee under 37 C.F.R. 1.17(e) is required by 37 C.F.R. 1.114 when the RCE is filed.
- a. The Director is hereby authorized to charge any deficiency in the following fees, or credit any overpayments, to Deposit Account No. 20-1469
 - i. RCE fee required under 37 C.F.R. 1.17(e)
 - ii. Extension of time fee (37 C.F.R. 1.136 and 1.17)
 - iii. Other _____
- b. Checks in the amount of \$790.00 and \$120.00 are enclosed
- c. Payment by credit card (Form PTO-2038 enclosed)

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print /Type)	Jeff M. Michelsen	Registration No. (Attorney/Agent)	50,978
Signature		Date	December 18, 2006

CERTIFICATE OF MAILING

Express Mail Label Number: EL995985143USDate of Deposit: December 18, 2006Person Making Deposit: Diane Sanders

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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